

**Welsh Government
Health Protection Advisory Group (HPAG)**

**Minutes of the meeting
17 December 2019 10am – 11.30am
Cathays Park, Cardiff
Welsh Government**

Present:

Frank Atherton	(Chair)
Jean White	(WG)
Marion Lyons	(WG)
Christianne Glossop	(WG)
Chrishan Kamalan	(WG)
Nathan Barnhouse	(FSA)
Andrew Jones	(PHW)
Rhiannon Beaumont-Wood	(Directors of Nursing)
Matthew Hamar	(HSE)
NR	(WLGA)
Michael Evans	(NRW)

Secretariat:

Stephen Barry (WG)

Apologies:

Neil Surman	(WG)
Sarah Aitken	(Directors of Public Health)
Quentin Sandifer	(PHW)
Ceri Davies	(NRW)
Louise Davies	(Directors of Public Protection)

1. Introduction and Apologies

- 1.1. The Chair welcomed members to the sixth meeting of the HPAG, noted apologies and also asked the group to introduce themselves.

2. Minutes of the last meeting

- 2.1. The minutes of the meeting held on 8 July 2019 were reviewed and agreed as a true and accurate record. There actions from the last meeting were discussed and progress was noted:

Action	Update
Action (A13) – Welsh Government to review security clearance of staff to ensure staff can attend SCG should an incident arise.	In progress – some additional members of staff have received security clearance. Need to review current position.
Action (A14) – Once key recommendations on TB Action Framework are finalised Welsh Government to factor into work on strengthening the National Health Protection Service.	In progress – TB Action Framework not anticipated to be finalised until May 2020. Officials meeting with PHW lead on 17/12 to discuss latest draft.
Action (A15) – Welsh Government to capture groups comments as part of advice to Minister for Health on the Health, Social Care and Sports Committee recommendations regarding the elimination of hepatitis C.	<p>Actioned – The group agreed that an annual circular would be sufficient for focusing on hepatitis C elimination rather than a dedicated strategy and that awareness raising should be locally driven as opposed to funding a national campaign. It was agreed that elimination targets were key and once these targets had been revised and finalised a communication should be issued to HB Chief Executives clearly stating these are the minimum treatment figures expected. The group acknowledged that investment in prison services to improve hepatitis C testing would need to be captured as part of the broader inquiry/ review underway in relation to prison healthcare services.</p> <p>The above advice was captured as part of the briefing to the Minister. Minister has given both a written and verbal response to Committee's recommendations which reflects the above advice.</p>
Action (A16) CMO and CNO to issue a joint letter to all key professional bodies/unions emphasising that flu vaccination should be viewed as a professional responsibility for health and social care staff.	Outstanding – the group noted that although this specific communication had not been issued a number of separate communications from both the CMO and CNO had been issued to the service. It was agreed that this action was no longer necessary at this stage of the season but that a joint communication for 2020-21 should be considered.

Action (A17) – EDT paper on investment required to strengthen the National Health Protection Service to be broadened to reflect all key elements of the service.	Actioned – EDT paper broadened and subsequent agreed investment reflects all key elements of the service. Paper on strengthening the National Health Protection Service on the agenda.
Action (A18) – Ceri Davies to circulate a link to some recent high-profile permitting issues.	Outstanding - Stephen Barry to follow up with Ceri Davies.

3. Oversight of strengthening the National Health Protection Service (HPAG-6-P1)

3.1. **ML** presented a summary of the ministerial decision to invest in the National Health Protection Service. A National Co-ordination Group made up of representatives from the service was in the process of being established with the first meeting due to take place in early 2020. A number of work streams would need to be established looking at key issues such as recruitment of staff, developing an all-Wales system for dealing with high consequence infections and developing performance indicators for the service moving forwards.

3.2. **JW** highlighted that a number of existing programmes and initiatives had the potential to overlap with the work streams that were likely to be created and join up with these existing programmes was crucial to ensure there would be not duplication or confusion.

Action (A19) – Welsh Government to ensure oversight of strengthening the National Health Protection Service is fully joined up with existing programmes and initiatives.

3.3. **RB-W** stated the Nurse Directors remained unclear on the investment required by health boards in 2020-21 to support the UK AMR strategy and requested greater clarity.

Action (A20) – Welsh Government to issue communication to Directors of Nursing (and other NHS leads) confirming investment required in 2020-21 to support the UK AMR strategy.

4. Update on Seasonal Flu (HPAG-6-P2)

4.1. **ML** confirmed that flu was now circulating in Wales and although this was earlier than usual it was still within the expected parameters. Early indications suggested that the vaccine being offered this year appeared to be a good match, further studies would be undertaken mid season. Vaccine uptake amongst frontline healthcare staff was similar to last year, uptake in the over 65s was higher but under 65s in at risk groups remained a particular challenge with uptake stuck at around 40% (target 60%). The vaccine rates for children were currently lower than last year due to the issues experienced with the supply of this particular vaccine although current rates compared very favourably with those in England.

4.2. **CMO** expressed concerns around the preparedness of care homes and in particular the arrangements for antivirals. **ML** confirmed the agreement remained in place for GPs to prescribe antivirals in care homes and that care homes had again received guidance from PHW.

Action (A21) – Welsh Government to issue reminder to GPs re. NES for antivirals in care homes.

5. High Consequence Infections (Presentation)

- 5.1. **ML** gave a presentation setting out the actions necessary and initial learning from the UK response to the recent case of Monkeypox and the returning Lassa fever contacts.
- 5.2. **CMO** acknowledged there were significant questions around the preparedness of NHS Wales to deal with a similar situation and to be able to manage an infected case at one of our acute hospitals for at least 24hrs. It was agreed that whilst a key work stream of strengthening the National Health Protection Service would look at an all-Wales system for dealing with high consequence infections more urgent action was necessary to provide re-assurance.

Action (A22) – Welsh Government to arrange meeting of key partners in early January to deal with immediate needs for responding to a high consequence infectious disease, such as training needed for new PPE guidance. Communication to then be issued to the NHS setting out central planning underway.

Action (A23) – CMO to write to health boards, PHW and WAST requesting their plan/pathway for dealing with a high consequence infectious disease (deadline for response will be 31 March 2020).

- 5.3. The group discussed the governance arrangements around the NHS providing a response to issues such as high consequence infectious diseases and it was queried whether scrutiny should be taking place via the Health and Care Standards and HIW.

Action (A24) – Welsh Government to engage with HIW to understand if the scrutiny of NHS performance against the Health and Care Standards covers responding to significant incidents.

6. Update on TB outbreak in Llwynhendy (HPAG-6-P3)

- 6.1. **AJ** presented a paper on the ongoing response to the TB outbreak in Llwynhendy. It was confirmed that the screening of children recently identified would take place before Christmas whilst the screening for a significant number of adults was being planned for the new year.
- 6.2. It was confirmed that the outbreak was initially treated as a point source but the initial screening undertaken in 2010 did not appear to have identified all contacts and as a result there had been spread within the community. A further meeting with experts from PHE was planned for January prior to the next meeting of the Outbreak Control Team where any further screening/action would be discussed.
- 6.3. **MH** requested that HSE be informed at the earliest opportunity if TB was identified in a workplace.

7. Environmental Public Health (Presentation)

7.1. This presentation was postponed due to detailed discussion around managing high consequence infectious diseases.

Action (A25) – Presentation on Environmental Public Health to be prioritised for next meeting of HPAG.

8. Brexit

8.1 **CK** confirmed that planning for post Brexit continued and a no-deal Brexit remained a possibility. Discussions around an overarching non-legislative agreement between the 4 nations were underway and a draft agreement would be presented to this group once finalised.

8.2 **CK** confirmed that the 4 Nations EU Group considering health protection issues was now being chaired by Andrew Jones and Andrew would provide a further update to the group at the next meeting.

9. AOB and future agenda items

9.1 The group considered possible future agenda items and it was agreed that a broader look at risks in the system should be considered (not just limited to NHS and high consequence infectious disease). Welsh Government to discuss with FSA, LAs, HSE reps how this agenda item could be structured.

Action (A26) – Risks in the system to be considered at next meeting of HPAG.

9.2 Secretariat confirmed that dates for HPAG meetings in 2020 would be circulated to members before the new year.